

Inspiring Next Practices

INNOVATIVE RESEARCH ON AGING AWARD

2018

 matherlifeways®

Institute on Aging

The Innovative Research on Aging Awards recognize excellent applied research that offers important implications for the senior living industry. Created to inspire next practices, the annual award recognizes groups and individuals committed to bringing research to real life thereby improving the senior living industry.

Each year, Mather LifeWays Institute on Aging reviews dozens of submissions on a wide range of topics, including health and well-being of senior living residents, technological advancements for older adults, senior living workforce, and aging in place. MLIA selects award recipients based on:

- the quality of their research
- the actionable research findings and recommendations
- relevance to important problems in the senior living industry
- innovation

Sharing this important research reinforces our commitment to inspire next practices and encourage innovation throughout all areas that affect older adults. We hope these findings and ideas will benefit the senior living industry as a whole, as other organizations adapt the ideas and help transform them into next practices.

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**Deep-Diving into Falls
Filming Resident Falls Reveals
Gender-Specific Patterns**

**University of British Columbia
Yijian Yang, PhD**

**CATEGORY: Health & Well-Being
of Senior Living Residents**

Falls are the leading cause of injury-related death among older adults. Since previous research on falls has mostly been based on self-reports or interviews from witnesses, Dr. Yang felt the results may lack accuracy. In addition, most studies have been community-based and none have focused on differences in fall circumstances among frail older men and women in long-term care.

Although rates of falls are similar in men and women, the rate of fall-related injuries is higher in women, while the rate of fatality from falls is 49% higher in men. The researchers examined whether physiological and behavioral differences between men and women may cause them to fall differently.

They used digital video cameras to capture falls that occurred in common areas (such as dining rooms, hallways, and lounges) inside two long-term care communities during an eight-year period. Each video was analyzed by a team of three experts to determine the causes of imbalance and the activities at time of falling. Researchers also collected data on the health status of the participants. Statistical models were used to examine how fall circumstances associated with age, sex, and health status.

“...men were more likely than women to fall from loss of support with an external object and less likely to fall from tripping or walking.”

From Research to Real Life

The gender differences and other findings revealed in this study can become the basis of change within long-term care communities. Changes might include

- customizing exercise programs for men and for women, as well as programs tailored to degree of physical function
- reminding residents to lock their wheelchairs while transferring and aiding those who are unable to transfer independently to or from a wheelchair
- systematically reviewing medication and enhancing supervision for residents who are physically dependent
- increasing supervision for residents who exhibit aggressive behavior.

Finally, communities can use their own video cameras or wearable sensors to monitor activity levels and quality of performance to reveal mobility patterns among residents, which can be used to help design exercise programs for falls prevention in local communities.

FINDINGS

The researchers found that men were more likely than women to fall from loss of support with an external object, such as a cane, and less likely to fall from tripping. Men were more likely to fall while seated or rising, and less likely to fall while walking. Furthermore, regardless of sex, falls from loss of support were more common among individuals who were less independent in activities of daily living, who used more medications, and who used a diuretic. Individuals with independent activities of daily living and intact cognition were more likely to fall while walking, but less likely to fall while seated or while rising.

READ THE ABSTRACT

Yang, Y., van Schooten, K.S, Sims-Gould, J., McKay, H.A., Feldman, F., & Robinovitch, S.N. (2018). Sex differences in the circumstances leading to falls: Evidence from real-life falls captured on video in long-term care. *Journal of the American Medical Directors Association*, 19(2), 130-135. <https://doi.org/10.1016/j.jamda.2017.08.011>

Inflaming Emotions

Examining Effects of Diverse Emotions on Chronic Inflammation

Cornell University
Anthony D. Ong, PhD

The Pennsylvania State University
Lizbeth Benson
Nilam Ram, PhD

Arizona State University
Alex Zautra, PhD

CATEGORY: Health & Well-Being
of Senior Living Residents

Inflammation in the body increases with age and is related to numerous chronic diseases affecting older people such as diabetes and osteoporosis. Past research has shown that positive emotions may have an anti-inflammatory effect on the body. This study looked at whether the range and variety of those feelings also play a role. The researchers drew from studies in the natural sciences on the benefits of biodiversity, or the variety and abundance of different organisms within an ecosystem. Like the advantages afforded by biodiversity, their findings indicated that positive emotion diversity, or having a range of positive emotions, can help reduce inflammation.

To determine emotion diversity, they analyzed data from 175 people age 40 to 65 who reported on their negative and positive emotions for 30 days. Each evening, participants rated the extent to which they had experienced 16 positive emotions that day, from interested and determined to happy, excited, amused, inspired, alert, active, and strong. They were also asked to rate their experience of 16 negative emotions that day, including scared, upset, distressed, jittery, nervous, and ashamed. Their blood was drawn six months later and was tested for three inflammation markers.

“...people who reported a wide range of positive emotions on a day-to-day basis had less chronic systemic inflammation.”

From Research to Real Life

When it comes to infusing more diverse, positive emotional experiences into one's life, the simple daily practice of naming different positive emotions can help. For instance, paying attention to one's inner emotions and being able to mentally recognize situations that make one feel calm versus happy. This fine-grained understanding of one's positive emotions, in turn, may facilitate more effective emotion regulation and increase resilience to stress.

In addition, practitioners in the senior living industry should look for not only a broader definition of emotional health—one that emphasizes the fostering of positive states as well as the alleviation of negative ones—but also a deeper one that captures our capacity to sustain attention to positive emotions when coping with the everyday challenges of aging.

FINDINGS

The study's main finding was that people who reported a wide range of positive emotions on a day-to-day basis had less chronic systemic inflammation (marked by raised levels of proinflammatory cytokines through the body) than people who reported a smaller range—even if their overall frequencies of positive emotions were similar. This was true even after researchers controlled for traits like extraversion and neuroticism, body mass index, medication use, medical conditions, and demographics.

This research suggests there are health benefits to living complex emotional lives. Importantly, happiness isn't the only emotion that can help someone stay healthy as they age. How excited, amused, proud, strong, and cheerful one feels on a regular basis matters, too.

READ THE ABSTRACT

Ong, A. D., Benson, L. Zautra, A., & Ram, N. (2018). Emodiversity and biomarkers of inflammation. *Emotion*, 13, 3-14.

Helping Hand Hygiene Repurposing Technology to Protect Older Adults

Case Western Reserve University/
Cleveland VA Medical Center
Shanina C. Knighton, PhD

CATEGORY: Technological Advancements
for Older Adults

Older adults are at the highest risk for health care-associated infections. Patient hand hygiene is a simple approach to combat transmission of these infections; however, patient hand hygiene practice among older adults occurs much less than even the lowest compliers among health care workers. Older adults in health care settings have numerous contacts with others and sometimes inadvertently make contact with their own bandages, IV sites, and orifices with contaminated hands. The assumption is that older adults can clean their hands using wall dispensers, sinks, or products provided; however, behavior and resource barriers exist.

This study included 75 older adults with an average age of 66 who had had non-emergent hip, knee, foot, or toe surgery. Of these, 41 received personalized, prerecorded audio prompts for hand hygiene (3x/day for 3 days) and had an 8-ounce push-down bottle of hand sanitizer mounted to their bedside table with Velcro.

The researchers also created a patient-centered hand hygiene video and handout. All participants received these educational materials following surgery, which covered the most important times to clean their hands as a way to prevent infections. One group received the reminders, the video, and the handout; the other group received the video and the handout only.

“Older adults with the voice-recorded prompts cleaned their hands 4-5 times/day in comparison with the other group, which did so 1-2 times/day.”

From Research to Real Life

The successful tools in this study can easily and inexpensively be replicated in any setting: the educational video and handout, the prerecorded voice prompts, and the easy-to-reach bottle of hand sanitizer.

This study demonstrates that creative repurposing of technology can engage older adults and their family and care-givers despite challenges such as staff shortages and physical and mental barriers. The value of patients hearing the familiar voice of a loved one from the verbal reminder was an unintended consequence of this study that deserves further exploration.

FINDINGS

The 41 older adults who received the verbal prompts used approximately 20 grams more of hand sanitizer compared to the group that received the video and handout only. Family members or nurses recorded the verbal prompts with messages such as “It’s breakfast time, honey. Please don’t forget to clean your hands. I love you,” delivered at three times (7:00 a.m., 12:00 p.m., and 5:00 p.m.). Older adults who heard the voice-recorded prompt cleaned their hands approximately four or five times per day in comparison with the other group, which did so only once or twice per day. In addition, patients and families reported feeling more involved in the care provided.

This study provides evidence that hand hygiene can be self-managed by older adults if it is tailored to offset barriers to practice.

READ THE ABSTRACT

Knighton, S.C., Dolansky, M., Donskey, C., Warner, C., Rai, H., & Higgins, PA. (2018). Use of a verbal electronic audio reminder with a patient hand hygiene bundle to increase independent patient hand hygiene practices of older adults in an acute care setting. *American Journal of Infection Control*, 46(6), 610-616. <https://doi.org/10.1016/j.ajic.2018.01.005>

Fighting Brain Drain Slowing the Aging Brain's Neural Decline with Dance

Colorado State University
Agnieszka Burzynska, PhD

CATEGORY: Aging in Place

The researchers set out to determine which physical activities are most promising in maintaining brain and cognitive health in later life. Their study compared the effects of three different six-month exercise classes on the aging white matter of the brain:

- stretching and toning (no increase in aerobic capacity, typical for activities offered to older adults)
- aerobic walking (known to have positive effects on brain volume and cognition)
- dance (combined aerobic, social, and cognitive stimulation)

The researchers recruited 174 community-dwelling older adults (age 60 to 79) who had no cognitive impairment and were randomized into the three groups. Participants were given MRIs and tested for cognitive abilities and physical activity (using wearable activity trackers) before and after their intervention.

*“...only the dance intervention reversed
age-related changes to the brain...”*

From Research to Real Life

Overall, the findings suggest that aging services professionals should consider offering targeted interventions and activities aimed to maintain brain and cognitive health in cognitively normal adults in independent living, instead of focusing their efforts on those already diagnosed with cognitive impairment.

Specifically, innovative dance programs offering not only aerobic exercise but cognitive challenges (constant learning of new steps or routines) and social connections should be developed and offered in senior residences and communities.

FINDINGS

The researchers found that regardless of intervention, white matter declined in just six months in healthy older adults. This suggests that the aging of the brain is detectable on the scale of six months, which is the shortest period of neural change described to date. Slowing down this neural decline is critical for postponing cognitive decline or preventing dementia.

The study also found that only the dance intervention reversed age-related changes to the brain that predict transition from mild cognitive impairment to dementia. This suggests that engaging older adults in immersive activities combining aerobic, cognitive, and social stimulation such as dance may be particularly beneficial for their white matter.

READ THE ABSTRACT

Burzynska, A.Z., Jiao, Y., Knecht, A.M., Fanning, J., Awick, E.A., Chen, T., ... Kramer, A.F. (2017). White matter integrity declined over 6-months, but dance intervention improved integrity of the fornix of older adults. *Frontiers in Aging Neuroscience*, 9(59). doi: 10.3389/fnagi.2017.00059

Validating Volunteering Easing Loneliness in the Recently Widowed

Florida State University
Dawn Carr, PhD

Georgia State University
Ben Lennox Kail, PhD

Boston College
Christina Matz-Costa, PhD

Stanford University
Yochai Z. Shavit, MA

CATEGORY: Aging in Place

The research examines the problem of loneliness following widowhood among older adults, as well as the benefits to the newly widowed of volunteering. This study is innovative because loneliness has long been identified by the U.S. Institute of Health as a predictor of functional decline and death among older adults. Volunteering interventions may lead to significant benefits for vulnerable older adults and may offer a cost-effective solution to helping older adults maintain their health.

Using data from the longitudinal Health and Retirement Study, the researchers examined the married participants who lost a spouse during the four-year study period. The researchers compared participants' measure of loneliness to their measure of volunteer engagement behavior.

“...recently widowed older adults reported less loneliness—as long as their volunteer work was at least two hours per week.”

From Research to Real Life

By developing volunteer opportunities within a senior living community, you can create a culture of social engagement that can extend beyond the confines of your community. A broad base of research shows that older adults are particularly likely to benefit when they contribute to the health and well-being of younger adults through intergenerational interactions. By involving older adults in volunteer activities that help young people, it may be possible to simultaneously enhance the health and well-being of older participants as well as reshape the trajectories of the lives of at-risk young people.

Development of volunteer intervention programs are an inexpensive way to help individuals engage in activities that they find particularly meaningful and stay socially integrated in society.

FINDINGS

Researchers confirmed that those recently widowed older adults who began a volunteer role reported less loneliness—as long as their volunteer work was at least two hours per week. They found that those who volunteer at this frequency had no greater increase in loneliness than those continuously married. Additionally, older adults are particularly likely to benefit when they contribute to the health and well-being of younger adults. It's important to note that participants who volunteered fewer hours did not observe these benefits.

READ THE ABSTRACT

Carr, D. C., Kail, B. L., Costa, C., & Shavit, Y. (2018). Does becoming a volunteer attenuate loneliness among recently widowed older adults? *Journals of Gerontology: Social Sciences*, 73(3), 501-510. doi: 10.1093/geronb/gbx092

2018 BRONZE AWARD RECIPIENTS

Drive Time

Exploring How Specific Cognitive Training Delays Driving Cessation

The Pennsylvania State University – University Park

Lesley A. Ross, PhD

CATEGORY: Aging in Place

The ability to continue driving safely is of great concern to older adults and their families. In addition to loss of independence, older adults who stop driving are at greater risk for negative outcomes ranging from depression to increased risk of entering a long-term care community and mortality. Cognition, which can be maintained with targeted cognitive training programs, is closely linked to driving mobility and safety. This study examined the impact of three cognitive training programs on driving cessation across 10 years.

Participants were part of the Advanced Cognitive Training for Independent and Vital Elderly (ACTIVE) randomized controlled trial. Healthy, community-dwelling adults age 65 and better from six different US sites were enrolled and randomized into one of three cognitive training interventions. Interventions included 10 to 18 hours of training on processing speed, reasoning, or memory, as well as a no-contact control condition. All participants completed assessments before and after the training as well as at follow-ups during years 1 through 3, and years 5 and 10.

“Additional sessions for speed of processing training resulted in a 70% reduction of driving cessation.”

From Research to Real Life

Encouraging older adults to maintain their mobility directly impacts their independence and well-being. Cognitive training programs provide great promise for maintaining older adults' independence and everyday functioning, including driving. Consumers must carefully evaluate scientifically developed and evaluated cognitive training programs against those which do not have such evidence. Such training should be ongoing, if possible.

It's important to keep in mind that cognitive training is just one tool among a larger battery of possible lifestyle changes and interventions.

FINDINGS

Researchers were able to identify those participants within each group who were considered at-risk for driving cessation. In comparing these subsets of participants in the three cognitive training groups, the researchers found:

- those who received the reasoning training were 49% less likely to cease driving within 10 years
- those in the speed of processing training group were 55% less likely to quit driving within 10 years
- additional sessions for speed of processing training improved results further, resulting in a 70% reduction of driving cessation
- those in the memory training group showed no significant effects

Prior research has demonstrated that speed of processing training enhances on-road driving safety; therefore, this type of cognitive training can positively affect both driving safety and mobility among older adults who are at risk for mobility declines due to cognitive difficulties.

READ THE ABSTRACT

Ross, L. A., Freed, S. A., Edwards, J. D., Phillips, C. B., & Ball, K. (2017). The impact of three cognitive training programs on driving cessation across 10 years: A randomized controlled trial. *The Gerontologist*, 57(5), 838-846. doi: 10.1093/geront/gnw143

Exercising the Brain Workout Interventions Improve Cognitive Function in Older Hispanics/Latinos

University of Illinois
at Urbana–Champaign
Lissette M. Piedra, PhD
Flavia C.d. Andrade, PhD
Rosalba Hernandez, PhD

CATEGORY: Aging in Place

Older Hispanics/Latinos live longer than their non-Hispanic peers, but they also tend to experience a marked decline in their quality of life and endure serious functional limitations over the age of 65. Lack of exercise may play a role, as older Hispanics/Latinos are less likely to exercise than their non-Hispanic white counterparts, and thus are less likely to reap its related benefits. In addition, negative attributions of aging—for example, the idea that older age naturally coincides with declines in physical activity—may further contribute to the problem.

This study examined the effect of an existing exercise intervention called *iCaminemos!* on cognitive function among older Hispanic/Latino adults and the potential synergistic effects of an attribution retraining intervention given to a random sample.

Study participants included 571 Hispanics/Latinos age 60 and better who participated in *iCaminemos!* across 27 senior centers. All participants were randomly assigned a one-hour attribution-retraining session plus a one-hour exercise class, or to the control group, which received health education plus a one-hour exercise class.

Researchers analyzed data collected at baseline and at one- and two-year follow-ups and used statistical analyses to determine the effects of the exercise class and the attribution-retraining component on longitudinal changes in cognitive functioning, as measured by the Modified Mini-Mental State (3MS) examination.

“The findings are particularly notable for older adults on the cusp of clinically significant cognitive impairment.”

From Research to Real Life

By 2050, demographers estimate that the older Hispanic/Latino population will reach 17.5 million and constitute 20% of the older adult population in the United States. This study suggests that the mere availability of a low-cost exercise program was enough to promote sufficient activity among older Hispanic/Latino adults to enhance cognitive function, regardless of socioeconomic status and the presence of preexisting chronic diseases. Such a finding indicates that at least among older Hispanic/Latino adults, disparities in physical activity may have more to do with access to fitness programs, environments, and social supports promoting physical movement (gyms, safe neighborhoods, and trainers/coaches) than preconceived notions about the aging process.

The aging services industry can easily invest in creating culturally adapted gyms and exercise programs that can cater to the burgeoning older Hispanic/Latino population.

FINDINGS

The exercise intervention significantly improved cognitive function in older Hispanics/Latinos, regardless of whether it was supplemented with the age-related attribution retraining. The researchers found that despite low levels of education and income, older Hispanic/Latino adults in both intervention arms displayed improved cognitive functioning scores at the one- and two-year follow-ups.

These findings are particularly notable for older adults on the cusp of clinically significant cognitive impairment. For those on the border of cognitive impairment, a point-and-a-half increase in 3MS score makes a clinically significant difference in the extent to which one is considered to be disabled and for how long one lives with that disability.

READ THE ABSTRACT

Piedra, L. M., Andrade, F. C. D., Hernandez, R., Boughton, S. W., Trejo, L., & Sarkisian, C. A. (2017). The influence of exercise on cognitive function in older Hispanic/Latino adults: Results from the “iCaminemos!” Study. *The Gerontologist*, 57(6), 1072-1083. doi:10.1093/geront/gnw256

Individualizing Interventions Debunking “One Size Fits All” Psychology Interventions for Older Adults

Virginia Tech
Matthew C. Fullen, PhD, LPCC

The Ohio State University
Darcy Haag Granello, PhD, LPCC

CATEGORY: Health & Well-Being
of Senior Living Residents

Although interest in positive psychology is growing within the senior living industry, it is not yet known how to tailor wellness/resilience interventions so that they account for the heterogeneity of the older adult population. These interventions are not “one size fits all,” yet there is a lack of research on within-group variation as it relates to wellness/resilience constructs. The researchers set out to clarify how certain demographic variables, such as age cohort and mental health, relate to wellness and resilience. This study aims to promote discussion about positive psychology interventions that are responsive to diverse older adults.

The researchers surveyed 200 residents age 55 to 97 living among 12 independent living senior housing communities in or near a large metropolitan area. Questions were designed to focus on two areas:

1. Do group differences exist in wellness, resilience, and age perception based on age, sex, race, education, and depression symptoms?
2. Which profile of variables (i.e., wellness, resilience, age perception) is most strongly associated with self-rated depression among older adults?

The researchers then used multivariate statistical analyses to identify group differences.

“The researchers found that the younger older adults (age 55 to 70) had lower scores on wellness and resilience.”

From Research to Real Life

Providers may want to consider how to develop positive psychology programs in a manner that is culturally responsive, tailored to different generational cohorts (e.g., Boomers and non-Boomers), and integrated with mental health service delivery.

Wellness models should incorporate a breadth of dimensions, including emotional, social, spiritual, vocational, and contextual wellness. This study reveals that physical wellness was not as highly correlated with depression symptomatology as several other, non-physical variables. Findings like this should inform aging services programs, resources, and staffing.

A practical suggestion would be to develop wellness programs that can be customized depending on an individual or senior living community's definitions of well-being, considering several dimensions of well-being.

FINDINGS

The researchers found significant differences in wellness, resilience, and age perception based on age and mental health. Specifically, they found that the younger older adults (age 55 to 70—the Baby Boomers) had lower scores on wellness and resilience. Additionally, individuals ascribing to depression symptoms had lower wellness and resilience, as well as higher scores on negative age perception. They also found that a profile of variables significantly predicted whether a person ascribed to depression symptoms. Specifically, scores on coping-based wellness, resilience, and spirituality-based wellness were most closely associated with responses about depression.

READ THE ABSTRACT

Fullen, M.C., & Granello, D.H. (2018). Holistic wellness in older adulthood: Group differences based on age and mental health. *Journal of Holistic Nursing*. Advance online publication. doi: 10.1177/0898010118754665

Positive Views, Positive Outcomes

Exploring Older Adults' Views on Aging, Leisure Activities & Physical Health

Fordham University
Stephanie A. Hicks, PhD
Karen L. Siedlecki, PhD

CATEGORY: Aging in Place

This study aimed to examine the role of perceptions of aging on both self-reported health and physical limitations, as well as the constructs that might account for the relationships found. Two questions of interest from this research project included “How do older adults’ perceptions of aging influence their reported health?” and “Do certain behaviors and traits help explain the influence?”

The researchers utilized data from the German Aging Survey, an ongoing study of German adults age 40 to 85 at baseline. They examined data from one time point of this survey, which provided a sample of 5,194 middle-aged and older adults. They first examined the relationship between participants’ positive views of aging (PVA) and self-reported health, and then looked at the relationship between PVA and self-reported physical limitations. Then they assessed the roles of leisure activity engagement and positive affect in these relationships, both separately and jointly, to see how much each of these constructs contributed to the influence of PVA on each health outcome.

“The research found positive views of aging to significantly influence each health outcome.”

From Research to Real Life

The researchers suggest implementing activities for senior living residents that will promote more positive views of aging, positive affect, and more engagement in leisure activities to increase their self-reported health. Specifically, create more opportunities for leisure activities such as gardening, going on walks, and attending different types of events or social activities. You can also develop programs (or incorporate aspects of this into existing programs) that give residents a more positive perception of the aging process.

FINDINGS

The research found positive views of aging (PVA) to significantly influence each health outcome. Additionally, positive affect and leisure activity engagement each partially mediated these relationships, with age moderating some of the findings.

The impact of positive affect on the relationship between PVA and self-reported health was stronger among middle-aged adults than among older adults. On the other hand, the joint impact of positive affect and leisure activity engagement accounted for nearly the entire relationship between PVA and physical limitations among older adults only.

READ THE ABSTRACT

Hicks, S. A., & Siedlecki, K. L. (2017). Leisure activity engagement and positive affect partially mediate the relationship between positive views on aging and physical health. *The Journals of Gerontology: Series B*, 72(2), 259-267.

Trading Places

How and Why Life Plan Communities Become “Third Places” for Residents

University of Central Florida

Ji-Eun Lee, PhD

Denver Severt, PhD

CATEGORY: Health & Well-Being
of Senior Living Residents

Using the relational theory of third places, this study explored why and how Life Plan Communities become a meaningful place for residents by offering a rich, hospitality-oriented culture. The researchers proposed Life Plan Communities as a unique type of third place, where emotional support is particularly important in fostering place-attachment by residents and developed the construct of “place meaning” for residents.

The study proposed and hypothesized causal relationships linking resident need (tangibles, instrumental support, emotional support), place meaning (place-as-practical, place-as-gathering, place-as-home), and loyalty outcomes (satisfaction and word-of-mouth). Instrument support refers to assistance received from others that is tangible.

Participants in the study were Life Plan Community residents recommended by their community’s management based on their cognitive competence and level of health and energy. Paper questionnaires were distributed by mail, and 157 responses were received. Respondents were age 61 to 106 and approximately 66% were female. About 98% were white, and 90% had lived at their Life Plan Community for more than a year.

“The Life Plan Community is a significantly meaningful place to residents through the physical, instrumental, and emotional supports it offers.”

From Research to Real Life

Life Plan Community providers should strive to establish a strong hospitality service culture through the following:

- Put resources into designing and providing programs that meet third-place needs of residents by fostering emotional supports through staff and other residents. This will aid in the development of positive emotions, or affective attachment.
- Design programs to help new residents find substitutes for third places within the community. It is important to keep in mind the various unmet needs of different types of residents and offer an array of third-place substitutes. This entails getting to know each individual resident and their needs.
- Although many subplaces exist within the senior living community, the choice of having many third-place alternatives has disappeared. Thus, keeping a third-place culture—such as a place to meet daily for coffee and conversation—and a culture of home is vital to the management of communities. Only through conscientious efforts to maintain a hybrid of a third place while also having the trust and comfort of home can communities successfully optimize the resident experience.

FINDINGS

The results of the study indicated that residents' perception of needs significantly influenced their perceived level of place meaning, which in turn positively influenced loyalty outcomes. In other words, the Life Plan Community is a significantly meaningful place to residents through the physical, instrumental, and emotional supports it offers. In turn, residents are strongly loyal to their community.

The study's findings suggest that residents of Life Plan Communities may seek and find compensation for the loss of social and emotional support in their lives through a hospitality service culture. Components of hospitality service culture would be vital in Life Plan Community settings, facilitating perceptions and feelings of comfort and safety, establishing trust, and making friends in the community. Consequently, they may help residents live actively in their later lives.

READ THE ABSTRACT

Lee, J., & Severt, D. (2017). The role of hospitality service quality in third places for the elderly: An exploratory study. *Cornell Hospitality Quarterly*, 58(2), 214-221.

SUBMIT FOR THE 2019 INNOVATIVE RESEARCH ON AGING AWARD

Nominations will open in March, with a submission deadline in late May 2019.

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Staffed by esteemed researchers, Mather LifeWays Institute on Aging is an award-winning resource for research and information about wellness, aging, trends in senior living, and successful industry innovations. In order to support senior living communities and others that serve older adults, the Institute shares its cutting-edge research in areas including effective approaches to brain health, ways to enhance resilience, and successful employee wellness programs. Mather LifeWays Institute on Aging is part of Mather LifeWays, a 75+-year-old not-for-profit organization dedicated to enhancing the lives of older adults by creating Ways to Age Well.SM

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1603 Orrington Avenue, Suite 1800 | Evanston, IL 60201
(888) 722.6468 | institute@matherlifeways.com

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Institute on Aging
